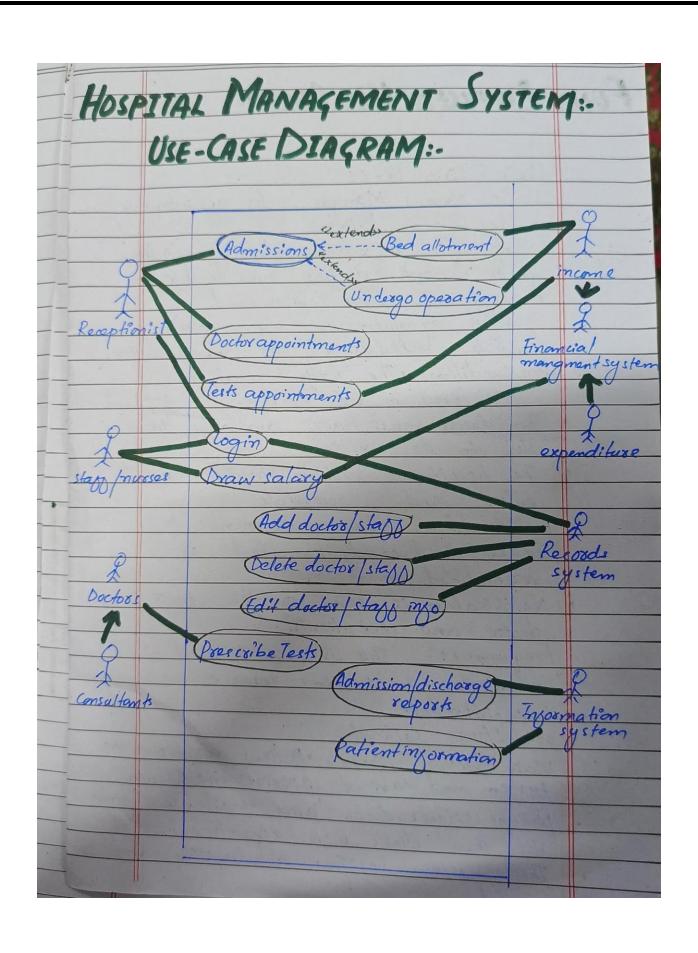
NAME: MUHAMMAD ABUBAKA	AR	REG NO: FA22-BSE-155
SUBMITTED TO: SIR MUKHTIAI	R ZAMIN	DATE: 10-15-2024
HOSPITAL MANAGEMENT SYSTEM		

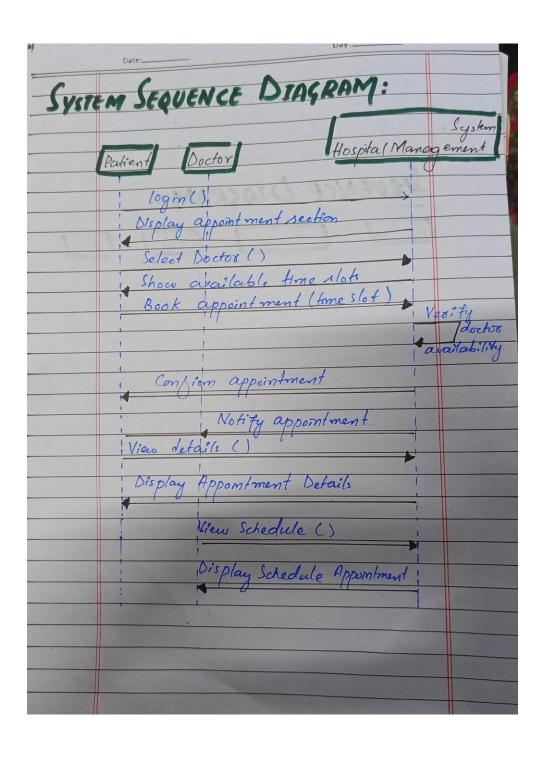


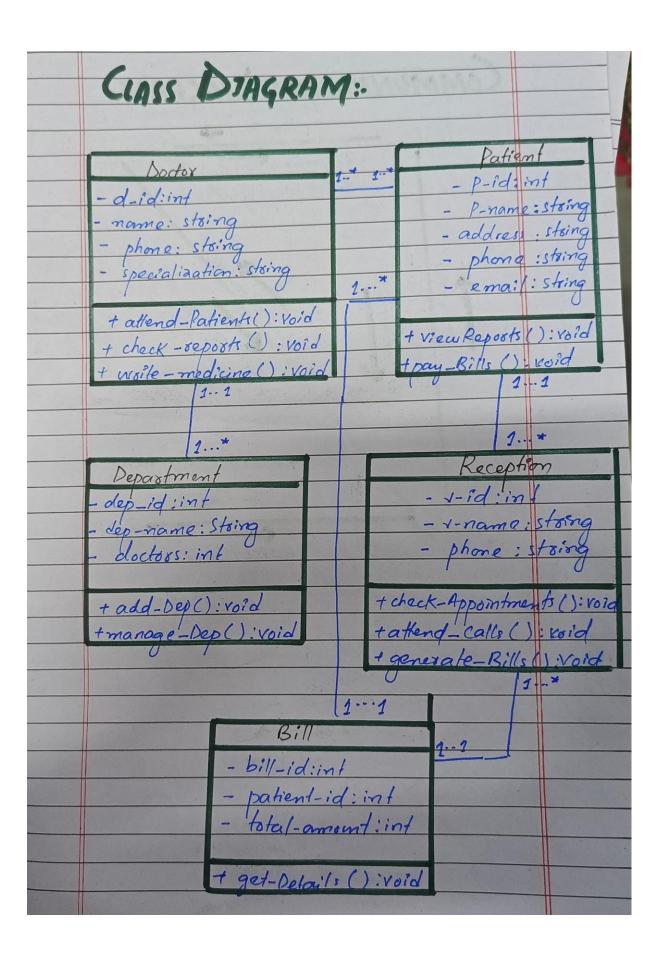
	Date	
Emily	DRESSED USE CASE :-	
T VLLY		
		1
	Use Case ID: UC-01	2/3
	Us Case Name: Manage Docto	
*	primary Actor: Patient Description: The manage doctor appoints	ank
	Description: allow patients, doctors and receptionis	4
2.30	I as licenster book, view and	
	and and and the conile	
25%	smooth scheduling and communica	tion.
	Pre-Condition: The patient must be	
	registered in the system.	,
•	The doctor must have available time	
wastering.	slots in the system. The hospital system should be	***
•	online and accessible.	
*	Post-Conditions: • The appointment &	
	Successfully booked, comceled 08	
20.2	rescheduled.	
6	Notification is send to the patter	d and a second
	doctor and receptionist.	
	trequency: This use case is used	***
	when ever a patient reserve an	
2 3 7 7 7	priority:	
	prodosity: Critical	
	Main Success Scenario: Patient logs into	the
	system and navigate appointment sech	
	patient selects doctor and available slot, then clicks book appointment. The system verifies availability	fime
	The system verite appointment.	
	availaibility	and
Management	U	1

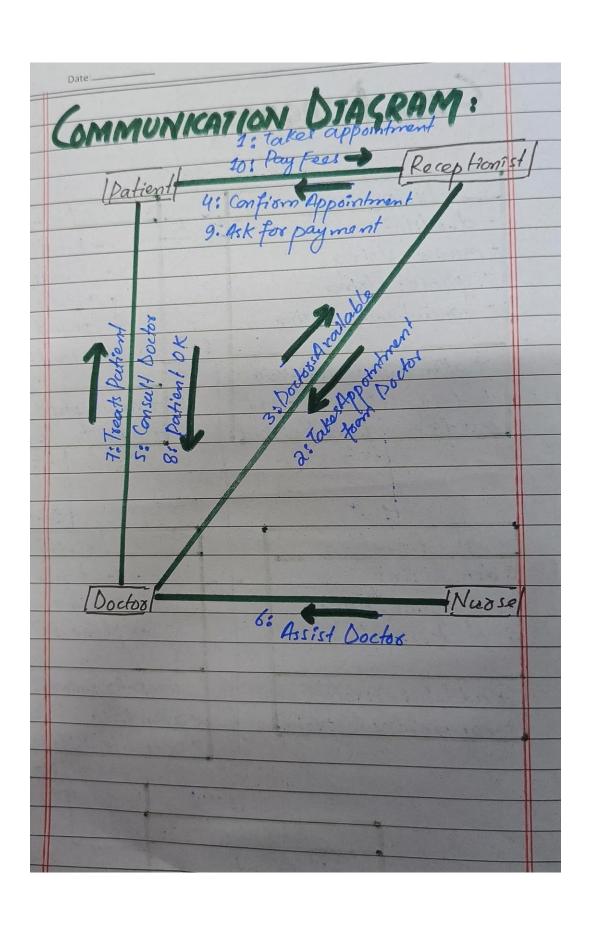
consisms the appointments.

Notifications love send to the patient and doctor.

patient and doctor view the appointment details in the system.







PRINCIPLES USED IN COMMUNICATION DIAGRAM:

LOW COUPLING IN THE DIAGRAM:

- Receptionist handles separate tasks: The receptionist's role is distinct from other
 components, focusing only on taking appointments, confirming them, and asking for
 payment. This keeps the receptionist decoupled from the patient treatment process and
 the doctor's responsibilities.
- **Patient interaction limited**: The patient interacts primarily with the receptionist for non-medical tasks (appointments, payments) and with the doctor only for treatment. The patient doesn't directly interact with the nurse or other internal processes.

HIGH COHESION IN THE DIAGRAM:

- Each actor focuses on their role:
 - The **doctor** only handles medical aspects like treating the patient or canceling appointments when needed.
 - The **nurse** only assists the doctor when necessary, keeping their tasks specific and related to treatment.
 - o The **receptionist** deals exclusively with administrative tasks like appointments and payments, without overlapping with treatment duties.
- This separation ensures each actor performs a set of closely related tasks, making the system cohesive.

POLYMORPHISM IN THE DIAGRAM:

- Receptionist manages both appointments and payments: The receptionist can handle different types of tasks for different actors (like patients and doctors) but treats these interactions similarly in a flexible way. This concept can be applied in software through polymorphism where one object can manage different types of interactions.
- **Doctor or nurse interaction flexibility**: The nurse and doctor are both involved in patient care but have different roles (doctor treats, nurse assists). The system could treat them similarly while allowing for differences in their actions.

PURE FABRICATION IN THE DIAGRAM:

• Receptionist role as a fabricated class: The receptionist is responsible for appointments and payment management, which helps offload administrative duties from the doctor and patient. This separate role is not tied to a real-world medical task but is necessary for system structure, showing pure fabrication to keep responsibilities clear and reduce unnecessary coupling.

• **Nurse as an assistant role**: The nurse's role is purely to assist the doctor, a fabricated necessity to help ensure smooth operation, without directly engaging in the core responsibilities of the patient-doctor relationship.

CONTROLLER IN THE DIAGRAM:

- Receptionist as a system controller: The receptionist acts as the controller in this system by managing the flow of information between the **patient**, **doctor**, and other staff. The receptionist takes appointments, checks if the doctor is available, confirms the appointments, and asks for payment, making them the main point of control for managing appointments and initial interactions.
- **Doctor as a secondary controller**: After the receptionist's initial control, the doctor steps in to manage the medical side by either treating or canceling the patient's appointment based on availability and need, becoming a secondary controller for patient care.